

L12 0000 33017

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

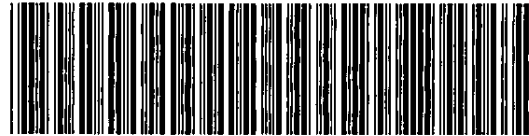
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Holguin Landscaping Maintenance, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Arnaldo Garces  
(Name of Person)  
Holguin Landscaping Maintenance LLC  
(Firm/Company)  
5317 Washington St.  
(Address)  
Hollywood, FL. 33021  
(City/State and Zip Code)

For further information concerning this matter, please call:

Arnaldo Garces at ( 786 ) 295-0941  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &  
Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Holguin Landscaping Maintenance LLC

2. The Articles of Organization were filed on 3/8/12 and assigned

document number L12000033013

3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Not producing profits as expected.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Arnaldo Gorces

5317 Washington St.

Hollywood, FL 33021

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

  
Signature

Arnaldo Gorces  
Printed Name

**FILING FEE: \$25.00**

FILED  
MAR 27 2012  
CLERK OF CIRCUIT COURT  
JUDICIAL CIRCUIT IN AND FOR  
DADE COUNTY, FLORIDA  
6196 41 52 MAR 27